

<b>NHS Greater Glasgow and Clyde</b>	<b>Paper No. 24/114</b>
<b>Paper Title</b>	<b>Standing Committee Chair's Board Report</b>
<b>Meeting:</b>	<b>NHSGGC Board Meeting</b>
<b>Date of Meeting:</b>	<b>29 October 2024</b>
<b>Purpose of Paper:</b>	<b>For Assurance</b>
<b>Classification:</b>	<b>Board Official</b>
<b>Name of Reporting Committee</b>	<b>Audit and Risk Committee</b>
<b>Date of Reporting Committee</b>	<b>17 September 2024</b>
<b>Committee Chairperson</b>	<b>Ms Michelle Wailes</b>

## 1. Purpose of Paper

**The purpose of this paper is to:** inform the NHS Board on key items of discussion at the NHSGGC Audit and Risk Committee.

## 2. Recommendation

The Board is asked to note the key items of discussion at the recent meeting of the Audit and Risk Committee on 17 September 2024 as set out below and seek further assurance as required.

## 3. Key Items of Discussion

The Committee noted changes in membership and welcomed Jacqueline Cameron, Becky Metcalfe and Brian Auld. The Committee noted that Ms Margaret Kerr had agreed to remain as Vice Chair.

### 3.1 Fraud Report and Counter Fraud Services Update

- Paper provided for assurance.
- An update was provided on current fraud cases and the actions which had been undertaken to prevent, detect and investigate fraud in the period 1 April 2024 to 31 July 2024.

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- The Annual Action Plan for 2024/25 had been developed and activities aligned to the NHS Scotland Counter Fraud Strategy.
- The Committee noted that engagement with online Fraud Awareness Training had decreased, therefore work was taking place to increase e-learning engagement.
- The Committee were assured by the report.

### 3.2 External Audit Tracker

- Paper provided for assurance.
- The Committee received an update on progress in delivering the 15 audit recommendations made by Ernst Young in their Annual Audit Report for 2022-23 and the 7 recommendations from their 2023-24 Annual Audit Report.
- A meeting would be held with Ernst Young to review the expected outcomes and evidence required to complete the audit actions.
- The Committee were assured by the report.

### 3.3 Internal Audit Reports

- Papers provided for assurance.
- The Committee received the following Internal Audit Reports: Internal Audit Progress Report, Property Transaction Monitoring Report, Sustainability and Value Programme, Succession Planning, Hospital Discharge Update and Management Action Follow Up Q2 2024/25.
- The Committee noted that work was on track to fully comply with the new Global Internal Audit Standards ahead of the timetable outlined.
- The Committee noted reports completed since the last meeting and noted there had been no Grade 4 recommendations raised and no control objectives assessed as red.
- The Sustainability and Value Programme Report highlighted that the processes were fit for purpose and were running as designed. While the rating was “requires improvement” due to the ongoing work to identify savings, good assurance was given on the processes.
- The Committee noted the advisory recommendations within the Succession Planning Report.
- The Committee noted the recommendations in the Hospital Discharge Report
- The Committee received a summary of the actions included on the audit action tracker, including outstanding actions brought forward from the previous review in June 2024. Good progress had been made in this quarter in implementing agreed audit recommendations.
- The Committee were assured by the reports.

### 3.4 Corporate Risk Register

- Paper provided for approval.
- The report covered the period March to May 2024.
- The score on Cyber Risk Threats increased from 6 to 12 to reflect recent incidents and the impact observed externally from Cyber incidents.
- There were five Corporate Risk Reviews completed over the last quarter. Four risks resulted in a decrease to the risk score and one remained unchanged
- The Committee were assured by the paper.

### **3.5 Risk Management Annual Report**

- Paper provided for assurance
- The paper provided an overview of annual performance for risk management for the period between January 2023 and December 2023.
- The key items of the report included the NHSGGC Corporate Risk Review, Risk Management Work Plan and 2024 Objectives and an overview of the Risk Management Steering Group.
- The Committee were assured by the paper.

### **3.6 Whistleblowing Quarter 1**

- Paper provided for assurance.
- The Committee noted that performance in relation Stage 1 cases remained consistent at 100%. Meeting the 20 day target for Stage 2 cases remained a challenge due to the complex nature of the cases.
- A Whistleblowing Practitioners Forum had been introduced for all Health Boards to allow for cross system learning.
- The Committee were assured by the report provided.

### **3.7 Information Governance Steering Group Update**

- Paper provided for assurance.
- The Steering Group continued to receive robust standard monitoring reports.
- Business discussed included Staff Communications on Cyber Security and Data Protection and the withdrawal of WhatsApp as a communication tool within NHSGGC.
- The Steering Group received an update on the recent Phishing Scam and the work that had been carried out to develop digital processing of Subject Access Requests.
- An update on the 2024 NIS review was provided.
- The Committee were assured by the report provided.

## **4. Issues for referral to other Standing Committees or escalation to the NHS Board**

There were no issues for referral to other Standing Committees or escalation to the NHS Board.

## **5. Date of Next Meeting**

The next meeting of the Audit and Risk Committee will take place on Tuesday, 3 December 2024.